

CLAIMS ONLY							Application Number <b>101050680</b>		Filing Date
							Applicant(s)		
<b>* May be used for additional claims or amendments</b>									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	
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49									
50									
Total Indep	4								
Total Depend	15								
Total Claims	19								